

## Exhibit 300: Capital Asset Summary

### Part I: Summary Information And Justification (All Capital Assets)

#### Section A: Overview & Summary Information

**Date Investment First Submitted:** 2009-06-30  
**Date of Last Change to Activities:**  
**Investment Auto Submission Date:** 2012-02-23  
**Date of Last Investment Detail Update:** 2012-02-23  
**Date of Last Exhibit 300A Update:** 2012-07-23  
**Date of Last Revision:** 2012-07-23

**Agency:** 009 - Department of Health and Human Services  
Medicaid Services

**Bureau:** 38 - Centers for Medicare and

**Investment Part Code:** 01

**Investment Category:** 00 - Agency Investments

**1. Name of this Investment:** CMS Plan Enrollment (HPMS)

**2. Unique Investment Identifier (UII):** 009-000004258

#### Section B: Investment Detail

- Provide a brief summary of the investment, including a brief description of the related benefit to the mission delivery and management support areas, and the primary beneficiary(ies) of the investment. Include an explanation of any dependencies between this investment and other investments.**

HPMS manages the following plan enrollment processes for the Medicare Advantage and Part D (MAPD) programs: application, bid, and formulary submissions, marketing material reviews, plan oversight, complaints tracking, operational data feeds for enrollment and payment, and data support for the Medicare & You handbook and [www.medicare.gov](http://www.medicare.gov). HPMS supports these processes for all private plans in the MAPD programs. As the central e-government system for managing the day-to-day operations of these programs, HPMS ensures that there is a single mechanism by which plans and CMS can communicate electronically in a secure and efficient manner. With limited staff resources, HPMS is critical to CMS in managing the nearly 800 MA and PDP organizations to ensure that they are fulfilling the significant number of statutory, regulatory, and administrative requirements of the MAPD programs. The HPMS investment contributes to the "Transform Health Care" goal in the HHS Strategic Plan as well as to the "Excellence in Operations" and "Improving the Care of Individuals" goals of the CMS Strategic Action Plan. A primary mission of HPMS is to support the addition of new contract and plan choices to increase the accessibility and availability of drug and health plans to Medicare beneficiaries. Moreover, HPMS functionality enables the agency to negotiate with plans for quality benefit packages at a reasonable cost to the beneficiary and the government. Finally, HPMS collects detailed plan benefit data for use in

beneficiary education tools and provides for the review and approval of plan marketing materials. These activities ensure that Medicare beneficiaries have access to accurate and timely data and are well-prepared to select a plan that best suits their individual healthcare needs. This investment also makes significant contributions to an expanded e-government, implementation of the Federal Enterprise Architecture, and CMS' IT modernization blueprint. It builds the basic computing infrastructure needed to support several CMS systems; supports common standards and practices; and integrates security and privacy protections throughout the lifecycle. In addition to maintaining current operations, CMS will enhance the Plan Management Dashboard to add new key performance indicators for plan assessment, re-engineer the formulary submission process to gain efficiencies, and automate the review of retail pharmacy networks to strengthen the application review.

**2. How does this investment close in part or in whole any identified performance gap in support of the mission delivery and management support areas? Include an assessment of the program impact if this investment isn't fully funded.**

The HPMS investment closes the gap between the necessary annual plan enrollment lifecycle activities and the rigid timeframes in which these materials must be submitted by MA and Part D programs and reviewed and approved by CMS. Without the HPMS automated processes, the submission and approval of these activities would be incomplete and inconsistent given the limited submission and review windows. For example, the Health Service Delivery (HSD) review was previously done manually by CMS staff in different CMS regional offices, which resulted in inconsistent reviews of submitted applications. No published standards were provided for MA organizations to ensure they were contracting with a sufficient number of providers and facilities to meet CMS' standards. With the automation of the HSD review, criteria has been published so MA applicants know the standards they must meet and all applicants are held to the same standardized review criteria. CMS staff also now have time to further scrutinize other critical sections of the submitted application. The Plan Benefit Package (PBP) tool provides standardized data entry so that MA and PDP organizations can describe their plan benefit packages, including information on premiums, cost sharing, authorization rules, and supplemental benefits. The PBP software automatically generates the standardized sentences for the Summary of Benefits (SB) by using the plan benefit package data entered into the PBP software by the organization's user. These standardized sentences are used by the MA and Part D organizations in their SB marketing materials and by CMS to generate plan benefits data for display in the Medicare & You handbook and on the [www.medicare.gov](http://www.medicare.gov) website. Prior to the use of this tool, organizations submitted a narrative description of benefits, which had to be manually reviewed by CMS. Data entry methods and terminology differed greatly across organizations. No standardized sentences were generated and CMS staff had to manually create the data that displayed for the Medicare & You Handbook and on the [www.medicare.gov](http://www.medicare.gov) website. With the implementation of the PBP software, multiple review and standardization issues were resolved.

**3. Provide a list of this investment's accomplishments in the prior year (PY), including projects or useful components/project segments completed, new functionality added, or operational efficiency achieved.**

During the investment's prior year, the system was enhanced to include marketing surveillance. This module provides CMS the ability to enter & review data in support of

surveillance activities & effectuate compliance actions. Plans use this module to upload responses to deficiencies identified through marketing surveillance. The HPMS investment made modifications to the Plan Management Dashboard, and included the integration of complaint metrics to monitor program performance. The PBP software incorporated new cost share limitation rules, which reduced the number of non-compliant bid submissions by over 50%. The HPMS investment implemented provisions outlined in the Patient Protection and Affordable Care Act (Pub.L. 111-148) and the Health Care and Education Reconciliation Act of 2010 (Pub.L.111-152). This includes the collection & display of the Star Rating Quality Bonus Program, the Coverage Gap Discount program, & modifications to Direct & Indirect Remuneration data.

**4. Provide a list of planned accomplishments for current year (CY) and budget year (BY).**

Planned accomplishments for the HPMS investment include streamlining the bid review process by incorporating external tools to calculate out of pocket costs and identify significant increases in cost-sharing or decreases in benefits for beneficiaries. CMS will further enhance the Plan Management Dashboard for strategic planning, and will continue to refine the automated review of health service delivery tables. The HPMS investment will enhance the existing PACE monitoring module to align with newly issued sub-regulatory guidance, collect Quality Improvement Projects and Chronic Care Improvement Programs from MA organizations on an annual basis, and collect short-cycle dispensing information for Long Term Care facilities to reduce waste of unused dispensed medications.

**5. Provide the date of the Charter establishing the required Integrated Program Team (IPT) for this investment. An IPT must always include, but is not limited to: a qualified fully-dedicated IT program manager, a contract specialist, an information technology specialist, a security specialist and a business process owner before OMB will approve this program investment budget. IT Program Manager, Business Process Owner and Contract Specialist must be Government Employees.**

2011-08-26

## Section C: Summary of Funding (Budget Authority for Capital Assets)

1.

Table I.C.1 Summary of Funding

	PY-1 & Prior	PY 2011	CY 2012	BY 2013
Planning Costs:	\$0.0	\$0.0	\$0.0	\$0.0
DME (Excluding Planning) Costs:	\$0.0	\$0.0	\$0.0	\$0.0
DME (Including Planning) Govt. FTEs:	\$0.0	\$0.0	\$0.0	\$0.0
Sub-Total DME (Including Govt. FTE):	0	0	0	0
O & M Costs:	\$42.9	\$18.8	\$18.0	\$18.0
O & M Govt. FTEs:	\$3.6	\$1.3	\$1.4	\$1.4
Sub-Total O & M Costs (Including Govt. FTE):	\$46.5	\$20.1	\$19.4	\$19.4
Total Cost (Including Govt. FTE):	\$46.5	\$20.1	\$19.4	\$19.4
Total Govt. FTE costs:	\$3.6	\$1.3	\$1.4	\$1.4
# of FTE rep by costs:	36	13	13	13
Total change from prior year final President's Budget (\$)		\$-4.1	\$-4.4	
Total change from prior year final President's Budget (%)		-17.02%	-18.44%	

**2. If the funding levels have changed from the FY 2012 President's Budget request for PY or CY, briefly explain those changes:**

This investment has gone through the CPIC process. Any changes in funding from the President's Budget request reflect changing Agency priorities as CMS strives to implement critical legislation with ever decreasing resources.

## Section D: Acquisition/Contract Strategy (All Capital Assets)

Table I.D.1 Contracts and Acquisition Strategy

Contract Type	EVM Required	Contracting Agency ID	Procurement Instrument Identifier (PIID)	Indefinite Delivery Vehicle (IDV) Reference ID	IDV Agency ID	Solicitation ID	Ultimate Contract Value (\$M)	Type	PBSA ?	Effective Date	Actual or Expected End Date
Awarded	7530	<a href="#">HHSM500200900002U</a>	26301D0054	7530							
Awarded	7530	<a href="#">HHSM5000002</a>	HHSM500200600002I	7530							
Awarded	7530	<a href="#">HHSM500200800356G</a>	GS35F4052G	4730							
Awarded	7530	<a href="#">HHSM5000005</a>	HHSM500200700015I	7530							
Awarded	7530	<a href="#">HHSM5000003</a>	HHSM500200700015I	7530							
Awarded	7530	<a href="#">HHSM5000004</a>	HHSM500200700029I	7530							

**2. If earned value is not required or will not be a contract requirement for any of the contracts or task orders above, explain why:**

The Fu Associates contract for operations and maintenance does not include an EVM clause, as they are small business and deemed not required by our acquisitions office to perform EVM. New contracts will include EVM, where required by CMS contracting standards. For the contracts without the clause, monthly standard cost and schedule reports are received from the contractor. Bi-weekly meetings are held with the integrated project team and the contractor. There are also ad hoc meetings each week as well as weekly integration meetings with both of the major contractors. Cost and schedule are closely monitored.

Exhibit 300B: Performance Measurement Report

Section A: General Information

Date of Last Change to Activities:

Section B: Project Execution Data

Table II.B.1 Projects					
Project ID	Project Name	Project Description	Project Start Date	Project Completion Date	Project Lifecycle Cost (\$M)
NONE					

Activity Summary								
Roll-up of Information Provided in Lowest Level Child Activities								
Project ID	Name	Total Cost of Project Activities (\$M)	End Point Schedule Variance (in days)	End Point Schedule Variance (%)	Cost Variance (\$M )	Cost Variance (%)	Total Planned Cost (\$M)	Count of Activities
NONE								

Key Deliverables								
Project Name	Activity Name	Description	Planned Completion Date	Projected Completion Date	Actual Completion Date	Duration (in days)	Schedule Variance (in days )	Schedule Variance (%)
NONE								

## Section C: Operational Data

Table II.C.1 Performance Metrics

Metric Description	Unit of Measure	FEA Performance Measurement Category Mapping	Measurement Condition	Baseline	Target for PY	Actual for PY	Target for CY	Reporting Frequency
Percentage of HPMS help desk inquiries completed within 24 hours	Percent	Customer Results - Timeliness and Responsiveness	Over target	90.000000	95.000000	96.000000	95.000000	Quarterly
Percentage of HPMS system availability during normal business hours (6 am – 10 pm EST, Monday-Friday) except for regularly scheduled maintenance periods	Percent	Technology - Reliability and Availability	Over target	90.000000	95.000000	98.000000	95.000000	Monthly
Percentage of the time the monthly HPMS to OIS system feeds are delivered timely. This would be measured by a successful transaction of the data to gentran by 12 noon on the day of distribution.	Percent	Process and Activities - Cycle Time and Timeliness	Over target	92.000000	96.000000	0.000000	96.000000	Monthly
Percent of users with a positive HPMS experience as captured in the semi-annual satisfaction survey with the HPMS business owner community.	Percent	Customer Results - Timeliness and Responsiveness	Over target	85.000000	90.000000	0.000000	90.000000	Semi-Annual
Percentage of emergency database change requests (DB CRs) as an overall percentage of all database change	Percent	Process and Activities - Cycle Time and Timeliness	Under target	50.000000	30.000000	0.000000	30.000000	Quarterly



Table II.C.1 Performance Metrics								
Metric Description	Unit of Measure	FEA Performance Measurement Category Mapping	Measurement Condition	Baseline	Target for PY	Actual for PY	Target for CY	Reporting Frequency

requests (emergency, scheduled, and reoccurring).